

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: PARKSIDE RESIDENCE (0008936)

Address: 109 NORTH 14TH STREET, BLACK RIVER FALLS, WI 54615

License Status: REGULAR

Licensed/Certified/Registered 05/01/2001

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0094973 **End Date:** 06/03/2005 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091551 **End Date:** 09/23/2003 **Type:** STANDARD **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10006352 Served 11/13/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING	12/05/2003	Yes
83.14(2)	TRAINING DIETARY NEEDS & MENU PLANNING	12/05/2003	Yes
83.32(2)(a)1	PHYSICAL HEALTH	12/05/2003	Yes
83.32(2)(a)4	MENTAL AND EMOTIONAL HEALTH	12/05/2003	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 11/06/2003 **SOD #**10006352 **Appealed:** Yes **Decision:** STIPULATION

Sanctions

FORFEITURE---83.14(1)(d)

FORFEITURE---83.14(2)

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